

K.R. 11/4/00

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|-------------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMATIVITY REVIEW | 100 | 60080 | 12/3/99 4/6/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date | | |
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| Final | 2 | 7 | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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